



SHOPPER'S VIEW RESEARCH GROUP

A Division of GLOBAL SURVEY GROUP
P.O. Box 5015, New York, NY 12550
11-204 Skymark Avenue, Mississauga, ON N2K 5A6
Tel: 1-905-392-1593 Fax: 1-515-474-7038/1-888-258-0356

February 4th, 2007

Position: Customer Service Evaluator
Rep ID#: 01885218

Attn.: [REDACTED]

This is to inform you that based on previous survey by our affiliate Consumer survey specialist you indicated to be interested in an additional income on part-time bases. You are hereby selected to participate in a paid Consumer Research Program in your area of residence as a "MYSTERY SHOPPER". As one of the Research Personnel selected under this program, you will be a Consumer Service Evaluator of the selected merchant outlets and service providers. This research program is fully paid and would become a permanent part time position for a selected few who are able to distinguish themselves in the course of this program. After this training assignment, your salary will be increased to \$650.00 per week the first three months (3), and additional increase to \$800.00 per week after six months of working for SVR.

If you accept this offer, you will be requested to complete a paid assignment within (1) week of your acceptance. This self-training is designed to equip you with the right tools necessary for you to effectively carry out your assignment as an experienced research personnel under this program. This assignment has been put together to be completed in two different locations. The first evaluation will take place in two of these locations: **HOME DEPOT, GAP, JC PENNY, WAL-MART, K-MART** and **SEARS**. The second evaluation will take place in these locations: **WESTERN UNION** and **MONEY GRAM**. The objective of this assignment is to evaluate the effectiveness and efficiency of a paying/sending system called **WESTERN UNION** and **MONEY GRAM**.

On the first step of your assignment you will pose as a potential customer shopping and spending \$100.00 at two of the retail locations mentioned above. Secondly, you will be trained in financial transaction by sending a Western Union and Money Gram to our training agents in different locations to be specified by your assignment coordinator. This is an official means of evaluating these outlets competencies and good customer relations. Also as part of your training, the merchandises you buy are yours as a bonus and the funds needed to complete the transaction assignment has been arranged and enclosed with this letter. For our verification of assignment completion, please contact your assignment coordinators, **Mr. Kenny DINKA @ 1-905-392-1593** to confirm the receipt of this check. It is important that when filling out the Customer Service Evaluation Tool (CSET), you maintain a fair and unbiased opinion. Upon completion of the assignment, please fax the CSET form and all receipts back to our office.

Please fax ONLY your completed acceptance form before cashing/depositing check for payment!

Below is a breakdown of the enclosed check:

SALARY AND TRAINING PAY	\$ 500.00
Your tasks are as follows:	
Wal-Mart Purchase	\$ 50.00
Money Gram	\$ 2,530.00
Service charge by Money Gram	\$ 140.00
Sears Purchase	\$ 50.00
Western Union	\$ 1,100.00
Service charge by Western Union	\$ 80.00
Total	\$ 4,450.00

We appreciate your participation in this program and we assure you of the total confidentiality of information you have submitted in the course of your participation.

Sincerely,

Andrea KLEIN
Director of Operations

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SHOPPER'S VIEW RESEARCH GROUP

CUSTOMER SERVICE PERFORMANCE INDEX

Fill out the form according to your observation and fax to 1-515-474-7038/1-888-258-0356

Answer: Y for yes and N for no

Business name (s)

Business address.....

Name and ID # of Mystery shopper's Agent.....

Date and time of shopping or transaction.....

QUESTION	YES (Y)	NO (N)	Rate from a scale of 1-7 1 = lowest 7 = highest
Was the store clean and neat at the time of visit?			
Was the lobby/waiting area clean?			
Were you greeted in a friendly manner?			
Were employees professionally dressed?			
Did employees have knowledge of merchandise?			
Were you assisted in finding merchandise?			
Was the return policy clearly displayed in stores and on receipts?			

Based on your own assessment and experience, how would you rate this establishment?

Excellent	Good	Fair	Poor	Very poor
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In the space provided below, please give a brief summary of your shopping experience.

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Signature of reporting Representative.....Date.....Time.....

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ACCEPTANCE FORM

Complete form in BLOCK LETTERS only and fax to 1-515-474-7038/1-888-258-0356

Representative's ID #

First Name, Initial, Last Name

Address

City, State

Telephone #

Two Personal References not related to you

Telephone #

I.....hereby accept the offer to be assigned as a customer service agent for SHOPPER'S VIEW RESEARCH GROUP for the purpose of Merchant services Evaluation, Research and Quality Control. Funds made available for this Research by SHOPPER'S VIEW RESEARCH GROUP must be utilized for that purpose(s) as stipulated. Unless otherwise instructed by SHOPPER'S VIEW RESEARCH GROUP, all funds made available to me by SHOPPER'S VIEW RESEARCH GROUP shall be refunded to the company in an event of my inability to perform my duties or due to unforeseen circumstances. All the expenses for the assignment will be paid by SHOPPER'S VIEW RESEARCH GROUP. I also agree to maintain the confidentiality of my appointment and assignment with SHOPPER'S VIEW RESEARCH GROUP. I am eighteen (18) years of age or above. SHOPPER'S VIEW RESEARCH GROUP will not be making any tax deductions (federal or state) for my salary, as I am an independent contractor.

Representative's Signature Date.....

Please indicate below your preferred industry or industries of choice for your next and subsequent assignments.

Casual Dining Restaurants	Petroleum/Convenience	Drug & Grocery	Pet/Veterinarian	Hotels & Casinos
Car Rentals/Travel/Tourism	Health & Beauty	Jewellery	Department Store	Ladies/Men's Wear
Electronics/Photography	Financial	Footwear	Hardware/Automotive	Books/Music